

Relevant Challenges and Considerations for Public Health Nursing Practice

MINNESOTA DEPARTMENT OF HEALTH
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Purpose

Autonomy is the hallmark of the practice of public health nursing. Public health nurses find themselves working in circumstances without professional nursing supervision. This document systematically identifies and explains concepts relevant to public health nursing practice, and provides a step-by-step process for a public health nurse to use when sorting through complex practice situations that have challenging nursing practice implications. This paper aims to help public health nurses (1) follow American Nurses Association (ANA) Standards of Public Health Nursing Practice (American Nurses Association, 2013); (2) protect client safety; and (3) respect organizational lines of authority. When practicing without professional nursing supervision, this document will provide public health nurses with guidance for working through a process in determining safe public health nursing practice.

Audience

While the primary audience for this document is public health nurses, another key audience includes non-nurse supervisors of public health nurses. Professionals with other backgrounds do enhance the work of public health nurses and can address administrative factors related to supervision, yet there is value in a nurse supervising a nurse based on a common understanding of nursing practice issues and standards. In addition, non-nurse supervisors should not provide direction to a public health nurse regarding nursing practice. Thus, a non-nurse supervisor may be faced with the dilemma of how to continue supporting a public health nurse supervisee without possessing the expertise acquired through nursing practice. This can be done by using the following information as a guide in following important steps and considering appropriate resources.

Other audiences that will find this document helpful include, but are not limited to, nursing supervisors orienting new nurses, nursing teams discussing a practice issue, and public health nursing faculty instructing nursing students.

Methods

Three sources of information were incorporated into development of this document: (1) a review of relevant literature, (2) key informant interviews and (3) facilitated discussions of the Minnesota Public Health Nursing (PHN) Practice Council.

About the Minnesota PHN Practice Council

The [Minnesota Public Health Nursing Practice Council](#) serves as a collaborative state-wide forum for public health nurses from tribal and local health departments, The public health nurse consultants from the Minnesota Department of Health and other public health nurse professionals who share a commitment in addressing practice issues. The PHN Practice Council enhances and promotes the specialty of public health nursing.

Introduction

The concepts within this document have been identified by the PHN Practice Council as relevant to the nursing practice of a public health nurse. While they have been separated into sections for clarity, the concepts are best considered in unison when encountering a complex public health nursing practice situation. [Section A](#) identifies the statute and rule requirements for public health nursing practice in Minnesota. [Section B](#) defines the practice of public health nursing according to national standards. [Section C](#) describes experiences highlighting the

challenges of autonomous public health nursing practice. This information was defined during early exploration with the PHN Practice Council and key in identifying factors critical to the issue. [Section D](#) highlights relevant considerations of nursing practice, including the autonomy of public health nursing practice and the importance of collaboration. Lastly, [Section E](#) is the PHN Flowchart; this flowchart was designed as a process tool, for public health nurse use when sorting out a complex nursing practice issue.

A. Statutory Requirements for Public Health Nursing Certification

According to [Minnesota statute §148.171, Subd. 15](#), the "practice of professional nursing" means the performance, with or without compensation, of those services that incorporates caring for all patients in all settings through nursing standards recognized by the board and includes, but is not limited to:

- (1) providing a comprehensive assessment of the health status of a patient through the collection, analysis, and synthesis of data used to establish a health status baseline and plan of care, and address changes in a patient's condition;
- (2) collaborating with the health care team to develop and coordinate an integrated plan of care;
- (3) developing nursing interventions to be integrated with the plan of care;
- (4) implementing nursing care through the execution of independent nursing interventions;
- (5) implementing interventions that are delegated, ordered, or prescribed by a licensed health care provider;
- (6) delegating nursing tasks or assigning nursing activities to implement the plan of care;
- (7) providing safe and effective nursing care;
- (8) promoting a safe and therapeutic environment;
- (9) advocating for the best interests of individual patients;
- (10) evaluating responses to interventions and the effectiveness of the plan of care;
- (11) collaborating and coordinating with other health care professionals in the management and implementation of care within and across care settings and communities;
- (12) providing health promotion, disease prevention, care coordination, and case finding;
- (13) designing and implementing teaching plans based on patient need, and evaluating their effectiveness;
- (14) participating in the development of health care policies, procedures, and systems;
- (15) managing, supervising, and evaluating the practice of nursing;
- (16) teaching the theory and practice of nursing; and
- (17) accountability for the quality of care delivered, recognizing the limits of knowledge and experience; addressing situations beyond the nurse's competency; and performing to the level of education, knowledge, and skill ordinarily expected of an individual who has completed an approved professional nursing education program as described in [section 148.211, subdivision 1](#).

Requirements for Certification as a Public Health Nurse

Minnesota (MN) statutes define a public health nurse means "a registered nurse who meets the voluntary registration requirements established by the board by rule" ([Minn. Stat. §148.171, Subd. 18](#)).

Minnesota rules require the following of applicants for registration as a public health nurse:

- The applicant must have a baccalaureate degree or higher, with a major in nursing.

- The applicant’s course work must have included theory and clinical practice in public health nursing. The theory portion of the public health nursing education must have been at least 30 hours in length. The public health nursing content in a hospital diploma or associate degree program does not qualify.
 - At a minimum, the public health nursing education must have prepared the nurse to:
 - identify the incidence, distribution, and control of disease in a population, as well as the risk factors and environmental factors related to communities;
 - identify populations at high risk of illness, disability, premature death, or poor recovery;
 - intervene within high-risk populations;
 - evaluate the effect of interventions on the health status of a population; and
 - use community services, institutional resources, and other health care providers.
- ([Minn. R. 6316.0100](#))

B. Definitions and Standards of Practice for Public Health Nursing

Definition of Public Health Nursing Practice

According to the American Nurses Association (ANA),

“Public Health Nursing is the practice of promoting and protecting the health of populations using knowledge from nursing, social, and public health sciences... Public health nursing is a specialty practice within nursing and public health. It focuses on improving population health by emphasizing prevention, and attending to multiple determinants of health. Often used interchangeably with community health nursing, this nursing practice includes advocacy, policy development, and planning, which addresses issues of social justice. With a multi-level view of health, public health nursing action occurs through community applications of theory, evidence, and a commitment to health equity.” (ANA, The Definition and Practice of Public Health Nursing, 2013, pg. 2)

In addition to what is put forward in this definition, public health nursing practice is guided by the American Nurses Association Public Health Nursing: Scope & Standards of Practice, 2nd Edition as identified below:

Standards of Practice for Public Health Nursing

Standard 1. Assessment

The public health nurse collects comprehensive data pertinent to the health status of populations.

Standard 2. Population Diagnosis and Priorities

The public health nurse analyzes the assessment data to determine the diagnoses or issues.

Standard 3. Outcomes Identification

The public health nurse identifies expected outcomes for a plan specific to the population or situation.

Standard 4. Planning

The public health nurse develops a plan that prescribes strategies and alternatives to attain expected outcomes.

Standard 5. Implementation

The public health nurse implements the identified plan.

Standard 5A. Coordination of Care

The public health nurse coordinates care delivery.

Standard 5B. Health Teaching and Health Promotion

The public health nurse employs multiple strategies to promote health and a safe environment.

Standard 5C. Consultation

The public health nurse provides consultation to influence the identified plan, enhance the abilities of others, and effect change.

Standard 5D. Prescriptive Authority

Not applicable.

Standard 5E. Regulatory Activities

The public health nurse participates in applications of public health laws, regulations, and policies.

Standard 6. Evaluation

The public health nurse evaluates progress toward attainment of outcomes.

Standard 7. Ethics

The public health nurse practices ethically.

Standard 8. Education

The public health nurse attains knowledge and competence that reflect current nursing practice.

Standard 9. Evidence-Based Practice and Research

The public health nurse integrates evidence and research findings into practice.

Standard 10. Quality of Practice

The public health nurse contributes to quality nursing practice.

Standard 11. Communication

The public health nurse communicates effectively in a variety of formats in all areas of practice.

Standard 12. Leadership

The public health nurse demonstrates leadership in the professional practice setting and the profession.

Standard 13. Collaboration

The public health nurse collaborates with the population and others in the conduct of nursing practice.

Standard 14. Professional Practice Evaluation

The public health nurse evaluates his or her own nursing practice in relation to professional practice standards and guidelines, relevant statutes, rules, and regulations.

Standard 15. Resource Utilization

The public health nurse utilizes appropriate resources to plan and provide nursing and public health services that are safe, effective, and financially responsible.

Standard 16. Environmental Health

The public health nurse practices in an environmentally safe, fair, and just manner.

Standard 17. Advocacy

The public health nurse advocates for the protection of the health, safety, and rights of the population.

C. Challenges and Experiences of Public Health Nursing Practice

Information in Section C is derived from exploration of the issue by the PHN Practice Council.

Challenges of Public Health Nursing Practice

Public health nurses face unique nursing practice challenges, when supervised by a professional outside the nursing discipline such as the potential for a difference in opinion about client priorities set by public health nurses and other human service disciplines or the potential difference between public health nursing standards of practice for client care and the standards of practice for other disciplines. Inter professional boundaries between public health nurses and members of other public health disciplines are not always clear.

Since the public health nursing practice environment is largely autonomous, performance evaluation should be conducted in a way that assures ongoing competency for the nature of this type of practice. Some of the current best practices for ensuring ongoing competency include peer review, reflective practice, goal setting, and self-evaluation.

Experiences Illustrating Challenges of Public Health Nursing Practice

Broad Examples

- Public health nurses practice without professional nursing supervision
- Public health nurses practice collaboratively with other public health disciplines that have different perspectives; for example, when working with a social worker, both practitioners may be challenged in understanding and respecting inter professional boundaries and expertise when working with vulnerable clients and in case management programs.

Specific Examples

- Members of disciplines outside of nursing (e.g. jail administrator) determine goals and priorities, and disagree with decisions on a nursing practice issue
- Public health nurses practice in settings as the sole nursing staff person; examples include school nurses and correctional health nurses, who may need to delegate nursing functions to non-nursing personnel
- Public health clinic staff may not heed the professional judgment of a public health nurse when immunization schedules are not followed accurately
- Public health nurses work in a public health department, yet are supervised by human service staff (e.g., case management for a waiver program)

Examples Related to Scope of Nursing License

- Differentiation of specific responsibilities of RNs and licensed practical nurses (LPNs), when working together in a correctional health setting
- An RN/PHN case manager making case management decisions, based on an LPN reporting

D. Relevant Considerations of Public Health Nursing Practice

Autonomy of Professional Nursing Practice

The **autonomy of professional nursing practice** provides the boundaries within which public health nurses can determine the course of their own nursing practice.

- Standards of public health nursing practice, established through the American Nurses Association, describe competencies in public health nursing practice (ANA, 2013). As a specialty recognized by the American Nurses Association, public health nursing conforms its standards to the model document, *Nursing: Scope and Standards of Practice, Second Edition* (ANA, 2010).
- Clinical autonomy refers to the milieu of clinical practice, and involves decisions made within existing professional, regulatory, organizational, and departmental rules. Clinical autonomy involves freedom to work within existing practice standards (Weston, 2008, p. 406).
- Organizational or work autonomy refers to decision-making in relation to work of the division, department, or organizational operations. Decisions are made while considering governing rules and organizational structures (Weston, 2008, p. 405).

Environment of Professional Nursing Practice

The **environment of professional nursing practice** provides public health nurses with freedom and self-determination to make nursing decisions within the context of their legal scope of practice. The public health nursing practice of care fully utilizes the nursing process to make independent decisions.

To be **aware of the relevance** of Minnesota nursing statutes and rules, organizational structures, agency policies and procedures, and employment law, in relation to nursing practice is important.

Competency and Ongoing Evaluation of Nursing Practice

Competency and ongoing evaluation of nursing practice is necessary to ensure that public health nurses are safe and qualified practitioners, and that they adhere to relevant practice standards, guidelines, and regulations. It is necessary to practice ongoing professional competency in an autonomous environment of care.

- Reflective practice has been established as a way to assure continued competence for the practicing nurse (Beam, O'Brien, & Neal, 2010; Cirocco, 2007). Reflective practice is defined as “the process for assessment of one’s own practice to identify and seek learning opportunities to promote continuing competence” (North Carolina Board of Nursing, 2010).
- Tools like portfolios, goal-setting and self-evaluation, and peer review have been identified as methods to promote both excellence in nursing practice and accountability in professional responsibilities based on position description (Diaz, 2008; Fujita, Harris, Johnson, Irvine, & Latimer, 2009; Oermann, 2002).
- In order to be respected and viewed as authorities, public health nurses should possess the personal ability to advocate for practice measures and provide rationale for actions (Pair 1 interview comment, 2009).

Guidance for Practice

Guidance for practice ensures public health nurses seek and receive appropriate direction and support when practicing in a complex environment.

- Interviewed public health nurses identified communication and an open relationship with supervisory staff as crucial factors when discussing and requesting assistance on nursing practice issues (Pair 1 interview comment, 2009).
- Other sources of guidance include consultants and content experts, evidenced-based practice, professional standards, and professional organizations.
- Peer networks are also an effective mechanism for accountability and guidance, as long as the process is objective and ongoing (ANA, 1995, p.17; Pair 3 personal interview, 2009; Pair 1 interview comment, 2009).
- Nursing regulates itself through professional regulation; some methods include professional credentialing; self-regulation, such as peer reviews and evaluations; and legal regulation, such as legal regulatory mechanisms of licensure and criminal/civil statutes (ANA, 1995, p. 17).

Collaboration

Collaboration is necessary for a public health nurse, when working with others to achieve a common goal.

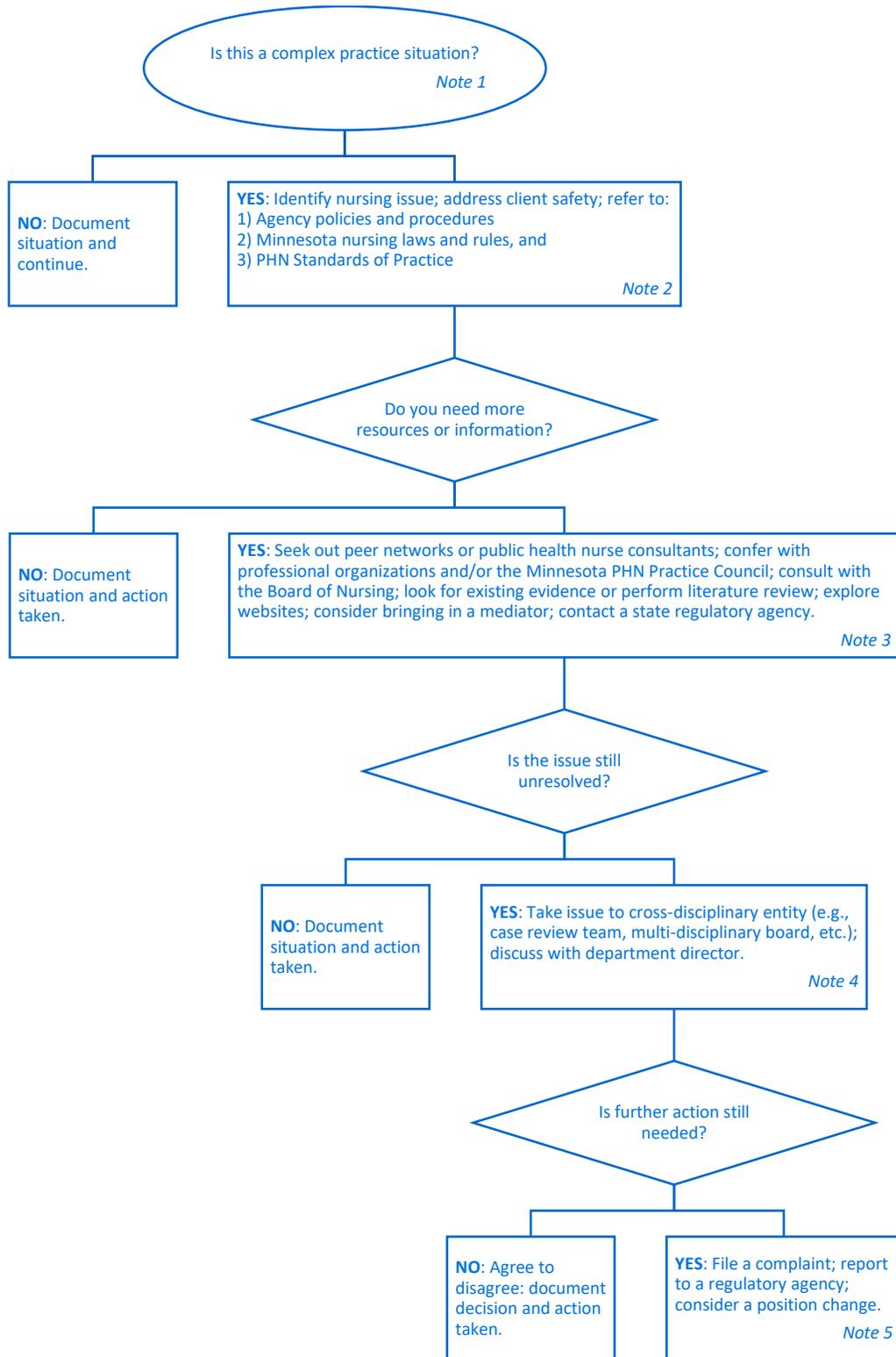
- Interviewed public health nurses identified respectful communication skills and an open relationship with supervisor as crucial components for sorting out differences in clinical practice. Establishing a formal cross-disciplinary mechanism to address practice issues related to client services may also be helpful; examples include regular agendas at team meetings and case management review teams (Pair 1 interview comments, 2009).
- According to the American Nurses Association, collaboration is integral to public health nursing practice and is one of the principles of public health nursing practice: “Collaboration with other professions, populations, organizations, and stakeholder groups is the most effective way to promote and protect the health of the people.” (2013, pg. 9).

E. Public Health Nursing Flowchart

The Public Health Nursing flowchart shows a systematic decision-making process for sorting out issues encountered in complex nursing practice situations, and incorporates concepts included within the narrative. While both the narrative and flowchart are intended to be used in conjunction in order to better understand the breadth and dynamics of a particular public health nursing practice situation, the flowchart may also be referenced independently. The PHN Practice Council strongly suggests that the public health nurse collaborate with a supervisor in working through the steps in the flowchart; this is helpful even when there is difference of opinion between the public health nurse and a supervisor. It is best if both acknowledge the disagreement, and work together to explore and address the nursing practice situation in order to reach an effective solution.

PHN Practice Council, Community Practice Guideline

A process for sorting out complex situations experienced by public health nurses in practice.



Flowchart Notes

NOTE 1

This flowchart will be helpful in sorting out situations that are complex, in which situational or professional incongruence exists. A public health nurse often realizes there is a nursing practice issue when s/he has a “gut feeling” that the situation seems problematic.

NOTE 2

At this point, clarify the extent of the nursing issue in the situation. Reference and verify agency policies and procedures. Find out what is usual and customary from your colleagues, and the current standard of nursing practice in the community. The Nurse Practice Act establishes legal parameters, nursing scope, and standards of practice (ANA pub), and the Quad Council PHN Competencies (found at www.achne.org) explain, in more detail, the nature of public health nursing practice.

NOTE 3

Be sure to reference credible web sources for evidence-based practice.

NOTE 4

All key informants identified a cross disciplinary entity, referred to by different names, as beneficial in sorting out practice issues. These entities meet on a regularly scheduled basis, and consist of professionals from different units in an organization (or from completely different organizations). In addition, having a cross-disciplinary entity was consistent with the experiences and recommendations of PHN Practice Council membership.

NOTE 5

At this point in the process, it is clear that you will not reach agreement on the nursing practice issue. This can be a difficult time for the public health nurse involved, and challenges encountered in attempting to reach resolution may cause the public health nurse professional and emotional stress. The public health nurse may need to explore further options, filing a complaint with the Board of Nursing, making a report to a regulatory agency or changing employment.

Summary

This document is intended to help ensure that public health nurses follow practice guidelines, protect client safety, respect organizational lines of authority, and minimize liability risk. The PHN Practice Council used a facilitated, collective process to define and understand the issue, consider contributing and relevant factors, and develop this document. During work on this complex issue, the PHN Practice Council determined that an accompanying flowchart would be an excellent way to portray the suggested decision process, which a public health nurse could utilize when encountering a challenging nursing practice situation. While the flowchart has been designed to work in concert with this document, it may be also be used independently.

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